

FORM B - MATERIAL DATA

Facility Tracking Number: _____

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Material Number: PN-_____

Sheet ____ of ____

(Copy and fill out one for each material/material group being reported. See the instructions for guidance on grouping materials.)

1. **Material Identification**

- (a) Material Name: _____
- (b) Manufacturer/Suppliers Name: _____
- (c) Manufacturer/Supplier Stock No.: _____
- (d) Product Type:
 - Coating/Coating Component (indicate Sub-type below)
 - Stain Top Coat Adhesive
 - Primer Sealer Paint/Ink
 - Basecoat Clear Coat Wood Treatment/Preservative
 - Cleaning Solvent Thinning Solvent
 - Other: _____

2. **Material Usage**

- (a) Amount Used in Reporting Year: _____
- (b) Percentage of usage for all materials of this type: _____% (Total to be reported in Item A-13)
- (c) Is material thinned, mixed, or formulated before use? Yes No (If yes, describe in Item G-4)

3. **Coating Technology** (Complete for Coatings/Coating Components Only.)

- Electrocoat Radiation-Curable UV-Curable
- High Solids Solvent-borne Electron Beam-Curable
- Multi-Component Water-Reducible
- Powder Ink/Print Paste
- Other: _____

4. **General Composition/Formulation Data**

- (a) Material Density: _____
- (b) Source of Data: Test Data Certified Product Sheet MSDS Other: _____
- (c) Solids Content: _____ weight-percent _____ volume-percent
- (d) Total VOC Content: _____ weight-percent _____ volume-percent
- (e) Water Content: _____ weight-percent _____ volume-percent

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5. **Speciated Components** (List all constituents present at greater than 1% which are HAPs or VOC, or at greater than 0.1% for carcinogens.)

Ingredient Name	CAS Registry Number	Weight Percent	HAP*	VOC
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

*See Attachment 1 for a listing of HAP compounds.